



Supplemental Application Data Sheet

Application Information

Application number::	10/693,632
Filing Date::	10/23/03
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	2186
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHOD AND SYSTEM FOR VALIDATING LOGICAL END-TO-END ACCESS PATHS IN STORAGE AREA NETWORKS
Attorney Docket Number::	ONAR-P01-001
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	Yes
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israel
Status::	Full Capacity
Given Name::	Roe
Family Name::	Alon
City of Residence::	Tel Aviv
Country of Residence::	Israel
Street of mailing address::	183 St. Botolph Street
City of mailing address::	Boston
State or Province of mailing address::	MA

Postal or Zip Code of mailing address:: 02115

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Assaf
Family Name:: Levy
City of Residence:: Tel Aviv
Country of Residence:: Israel
Street of mailing address:: 13 Nahal Kane Street
City of mailing address:: Kfsar-Saba
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 44245

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Shai
Family Name:: Scharf
City of Residence:: Tel Aviv
Country of Residence:: Israel
Street of mailing address:: 20 Dubnov Street, Apartment 9
City of mailing address:: Tel Aviv
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 64368

Applicant Authority Type:: Inventor
Status:: Full Capacity
Given Name:: Raphael
Family Name:: Yahalom
City of Residence:: Boston
State or Province of Residence:: MA

Country of Residence:: US
Street of mailing address:: 112 Hoover Road
City of mailing address:: Needham
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02494

Correspondence Information

Correspondence Customer Number:: 28120

Representative Information

Representative Customer Number:: 28120

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/420644	10/23/02

Assignee Information

Assignee name:: ONARO
Street of mailing address:: 46 Waltham Street
6th Floor
City of mailing address:: Boston
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02118